

Application Instructions and Guidelines for Clark County Outside Agency Grant (OAG)

Fiscal Year
2018/2019

Clark County Community Resources Management is soliciting **OAG Applications** for Fiscal Year 2018/2019 funding. Only those agencies who meet the application submittal requirements will be eligible to be considered for FY 2018/2019 OAG funds. After the review of all eligible applications, applicants will be notified at a later date on any funding recommendation decisions.

To be eligible for funding, a project must provide services and assistance that substantially benefits Clark County residents (NRS 244.1505). Projects that provide a substantial benefit are programs or services needed by disadvantaged citizens to increase their self-sufficiency and personal independence, programs or events that foster community pride or cohesiveness, and/or facilities and projects that strengthen the community's infrastructure. Generally, these OAG grants are intended to supplement services provided directly by the County, or are funded in lieu of the need for the County to establish such programs. Clark County Outside Agency Grant funds will be made available to Clark County Board of County Commissioners approved programs from July 1, 2018 to June 30, 2019.

Projects that are currently funded by Clark County from an **OAG Department Initiative** grant are not eligible to apply for this funding notice.

GRANT APPLICATIONS CAN ONLY BE ACCEPTED FROM NON-PROFIT ORGANIZATIONS AND LOCAL GOVERNMENT ENTITIES, NOT BY INDIVIDUALS OR BY FOR-PROFIT FIRMS.

The application can be accessed via a web link found on the Clark County Community Resources Management webpage at:

<http://www.clarkcountynv.gov/social-service/crm/Pages/OAG.aspx>

The PRE-APPLICATION deadline is Friday, October 27, 2017 at 5:00 p.m.

**The DEADLINE FOR COMPLETING ENTIRE OAG APPLICATION is
Friday, November 3, 2017, at 5:00 p.m.**

APPLICATION TIPS:

- 1) Make sure to check your email spam folder for ZoomGrants emails.
- 2) You may submit applications any time prior to the due date. Clark County is not responsible for any online submission issues related to your internet connectivity or computer system limitations. Submit your application early in order to ensure it is received.
- 3) The person that initiates the pre-application is the only one that can upload documents and submit the application.

If applicant needs accommodations to access a computer, scanner, or printer to complete the application please call Apryl Kelly at (702) 455-5030 or email Apryl.Kelly@ClarkCountyNV.gov. No advisory assistance will be given on the content of the application questions.

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Special Instructions for Governmental Entities

As a governmental entity (City, Health District, etc.) you need not supply items that are not applicable, such as a copy of the IRS Tax Exemption letter, agency By-Laws, Financial Accounting Submittal, or the filing of Internal Revenue Service forms.

APPLICATION INSTRUCTIONS

All questions need to be answered before submitting your application. If the question does not apply to you, type N/A. There are additional instructions in the online application. This document supplements those instructions. HINT: DO NOT wait until the last minute to submit your Application!

SUMMARY

REMEMBER: The person that logs in with their username and password to initiate the application is the only person who can submit the application.

There is a minimum request requirement of \$5,000 and a three (3) word limit for the program title. Include more than one email address and phone number for the organization. **DO NOT include the organization name in the program title. DO NOT attempt to describe the program in a sentence for the program title.**

Applicant View

Application Status: Not Submitted
You must be logged in to begin.
[Activity Log](#)

[Summary](#) [Pre-Application](#) [Application Questions](#) [Budget](#) [Documents](#)

Summary (answers are saved automatically when you move to another field)

[Instructions Show/Hide](#)

Project Title/Name

Amount Requested
Amount of OAG funds requested for this project USD

Applicant Information

First Name
Last Name
Telephone
Email

Organization Information (changes to this data will be reflected on all other applications for this organization)

Organization Legal Name/Entity Name
Address 1
Address 2
City
State/Province
ZIP+4/Postal Code
Country
Telephone
Fax
Website
EIN (XX-XXXXXXX)

CEO/Executive Director

First Name
Last Name
Title
Email

Additional Contacts for this Application
Additional Contacts will be copied on all emails sent to the application owner regarding this application. Enter ONLY email addresses separated by a comma. No names. No titles. No phone numbers.

[Next](#)

PRE-APPLICATION

COMPLETE THE PRE-APPLICATION, SUBMIT, AND WAIT FOR APPROVAL PRIOR TO COMPLETING THE APPLICATION.

Please answer all the pre-application questions and submit by the deadline. You will not be able to apply for OAG funds until your pre-application has been reviewed and approved. You will receive an email indicating whether your pre-application has been approved at which point you may proceed to completing the entire OAG application. **The organization is required to have all information requested prior to submitting the Pre-Application.** HINT: DO NOT wait until the last minute to submit your Pre-Application! **The Pre-Application deadline is October 27, 2017 5:00 p.m.**

1. I am aware that the Pre-Application closes at 5pm on Friday, October 27, 2017.
2. I am aware that the entire OAG 2018/2019 Application closes at 5pm on Friday, November 3, 2017 and I agree that no paper applications are accepted and no late submissions are allowed.
3. Have you read and reviewed the Restrictions and Requirements Tabs and the entire OAG 2018 2019 Application Instructions? *These tabs provide a summary of eligibility, financial management, accounting and reporting requirements.*
4. Are you a public organization or a non-profit organization?
5. If you are a non-profit organization, do you have a letter from the IRS acknowledging that you are a 501(c)3, 501(c)4 corporation or a subordinate organization of one of those two aforementioned, with current Section 905 status from the IRS? *You will be required to attach a copy when submitting the application unless you are a government agency. You must currently be in possession of this form.*
6. Does your organization's Board of Directors consist of at least five (5) or more voting persons? *If there are less than five (5) board members, how do you manage oversight of the non-profit with less than five board members? Explain below.*
7. Are all voting board members unrelated to each other, unrelated to the organization's executive director and unrelated to staff through family or business relationships?
8. If no, please describe below how your Conflict of Interest Policy addresses a perceived, apparent, or actual conflict of interest between staff and board members or business associates who are related.
9. List Board of Directors (voting and non-voting members are needed):
10. If recommended for funding, will your organization agree to submit adequate documentation of billings, transactions, and payments, in accordance with the provisions of the approved agreement, to substantiate your claims?

11. If recommended for funding, will you have an adequate financial management system, including appropriate internal controls, budget controls, accounting controls, property controls, and procurement standards which avoid conflicts of interest?
12. Does this request for OAG funds represent more than 50% of your agency's annual budget?
13. If you are applying as a non-profit organization, does your organization currently have a certificate of Good Standing from the Nevada Secretary of State dated today or later? *You will be required to attach a copy when submitting the application unless you are a government agency. You must currently be in possession of this form.*
14. If you are applying as a non-profit organization, does your organization currently have a Clark County Charitable Organization Registration Certificate dated today or later? *You will be required to attach a copy when submitting the application unless you are a government agency. You must currently be in possession of this form.*

Please answer and submit Pre-Application questions by 5:00 p.m. on Friday, October 27, 2017.

You cannot complete the OAG application until your pre-application has been reviewed and approved. You will receive an email indicating whether your pre-application has been approved at which point you may proceed to completing the entire OAG application. If you do not receive an email after 24 hours of submitting your Pre-Application, please call Apryl Kelly at (702) 455-5030.

APPLICATION QUESTIONS

1. Project Priority.

Clark County is limiting the number of applications per agency to two (2) for FY 2018/2019 Outside Agency Grant funding. If your agency is submitting two applications, you will need to submit two pre-applications and fill out one application per project or program.

In order to properly submit two applications, follow these steps:

Log on to ZoomGrants and complete and submit a Pre-Application. **Log out completely and close the Internet browser. Reopen the Internet Browser and then reopen it.** After an email confirmation that the Pre-Application was approved/declined, log back in to ZoomGrants and complete a second Pre-Application.

YOU MUST LOG OUT AND CLOSE YOUR INTERNET BROWSER; REOPEN AN INTERNET BROWSER AND LOG BACK IN TO ZOOMGRANTS TO SUBMIT A SECOND PRE-APPLICATION.

Indicate the Priority of each project in each application. If you submit one application only, please mark it as Priority 1.

2. Project Type.

Please check the box next to the project type that best describes the activities of your project. If your project does not easily “fit” into any of the above categories, please check “**Other**” and concisely describe the activities you are proposing.

- **Advocacy/ Community Outreach:** Awareness, advocacy, on behalf of a specific clientele/ cause
- **Case Management:** Services that aim to have client achieve the optimum level of wellness and functional capability
- **Child Development:** Services that aid in improving children’s cognitive, social, emotional development.
- **Family Development:** Services aiming to achieve the optimum level of wellness and functional capability of families
- **Community/Economic Development:** Projects/services that diversify the economy of Southern Nevada; encourage business development; relocation and the creation of job and industry clusters; creating new jobs
- **Asset Development/Financial Literacy:** Efforts that increase the community’s skills and knowledge to achieve and improve financial security and circumstances
- **Job Training:** Services improving employment skills (resume help, job connections, vocational job training)
- **Education/Literacy:** Projects that improving the general education of residents (ex. Reading programs, tutoring)
- **Energy Conservation:** Services aiming to reduce consumption of energy, and/or develop energy efficient cost cutting improvements
- **Food/Nutrition:** Projects distributing food/ nutritional supplements to members of the community
- **Health/Mental Health:** Health projects provide direct medical, dental, vision, or mental health services to Clark County residents. Mental Health projects provide direct mental health services to Clark County residents
- **Housing/Shelter:** Projects/ Programs that provide emergency shelter or housing to Clark County residents
- **Senior Services:** Projects/ Programs that provide services to seniors only (ex. Transportation, meals, assistance)
- **Arts/Cultural:** Projects that foster cultural and artistic capacity/ awareness (ex. Fine Arts, cultural activities for the community)
- **Other:** if your project does not easily “fit” into any of the above categories, please specify what type of service your project will provide to the citizens of Clark County.

3. Target Population.

To the best you can, select the intended target population. In questions 5 & 6, project summary and description you will go into more detail on the population served.

- **Senior Citizens.** Persons 60 years of age and older. They may include single individuals living alone, two-person households, seniors raising grandchildren, seniors living with adult children, or seniors living in other arrangements (among others).
- **Infants/ toddlers.** Newborns, babies, and children up to 3 years of age.
- **Children.** Children between the ages of 4 and 12 years old.

- **Teen.** A person between the ages of 13 to -18 years old.
- **Young Adult.** A person between the ages of 18 and 25 years old.
- **Veterans/Active Duty Military.** Persons who have served in the U.S. Armed Forces and may be eligible for services or income supports provided by the U.S. Department of Veterans Affairs, OR persons who are currently serving in the U.S. Armed Forces.
- **Disabled.** Persons living with a disability, as defined in any of the four definitions:
 - Defined in section 223 of the Social Security Act (42 U.S.C. 423);
 - Having a physical, mental, or emotional impairment that (a) is expected to be of long-continued and indefinite duration; (b) substantially impedes an individual's ability to live independently, and (c) is of such a nature that such a disability could be improved by more suitable housing conditions;
 - A developmental disability as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C 15002); or
 - The disease of acquired immunodeficiency syndrome (AIDS) or any conditions arising from the etiological agent for AIDS
- **Homeless. (According to the HEARTH "Homeless" Definition Final Rule.**
See the HEARTH "Homeless" Definition Final Rule.
<https://www.hudexchange.info/resource/1928/hearth-defining-homeless-final-rule/>
- **Low- Income.** 80% of area median income
- **Families.** Households with children
- **Community-Wide.** The overall community and Clark County
- **Other.** Target populations not listed

4. **Organization Mission & Organization Services Description.**

Describe your organization's overall mission. Also **briefly** describe the different types of services your organization provides. Note, this is for the *overall agency* the next question is program/project specific.

5. **BRIEF Project Summary.**

This will serve as a summary of your project proposal for application reviewers. SUMMARIZE in no more than 300 words (no more than one to two paragraphs), the PROJECT or PROGRAM for which you are requesting funds. Briefly describe the project goal, intended participants, and the planned use of OAG funds. *You will be able to elaborate in the next question's answer.*

6. **Project Description and Expected Outcomes.**

DESCRIBE THE PROJECT/ PROGRAM for which you are requesting funds and provide goals and expected outcomes. Indicate the approximate TOTAL NUMBER of individuals and/or families (specify which) that you plan to serve. Please differentiate between the outcomes for individuals and families. The count may be a duplicated count. For example, if a particular individual receives food through your program in July 2012 and comes back in August 2012 for the same food service he/she may be counted twice.

This response should be more detailed than number 6. Also note that this information can be used for *Attachment 1: Project Outcomes Performance Measurement.*

7. Project Outcomes- Unduplicated Count.

Indicate the approximate NUMBER of UNDUPLICATED INDIVIDUALS and FAMILIES (specify which) you plan to serve through this project. This count should be an unduplicated count. For example, if a certain individual receives services at your agency one month in July and returns for the same service the next month in August, this person should be counted once for that year as receiving services through your agency.

8. Project linkage to County Services.

Identify linkages, services, or gaps of services being addressed by your project that directly relate to County services. If applicable, provide evidence of collaboration with County divisions/departments. Evidence may be the indication of prioritizing client referrals originating from County departments, or reference to a Memoranda of Understanding (MOU) in place between your agency and a County department/division.

Identify how requested OAG funding would support County priorities and department needs. Your project should supplement services directly provided by the County or should fill a need that the County has not been able to provide.

9. Indicate the Commission District covering the area where the majority of your services are being provided.

The following link will lead you to a map of the different Commission Districts.

<http://www.clarkcountynv.gov/Depts/countycommissioners/Pages/CommissionerDistrictSearch.aspx>

The Districts and Commissioners representing each district are as follows:

District A: Commissioner Steve Sisolak
District B: Commissioner Marilyn Kirkpatrick
District C: Commissioner Larry Brown
District D: Commissioner Lawrence Weekly
District E: Commissioner Chris Giunchigliani
District F: Commissioner Susan Brager
District G: Commissioner James Gibson

If you also wish to see which district your project is located you can also go to the Open Web website, <http://gisgate.co.clark.nv.us/openweb/> then click on search, then go to the address tab, type in your address and click on the property for property information. In the Property Information box click on Elected Officials and you will see your Commissioner listed and the Commission District.

10. Project Jurisdiction and area.

Please indicate the areas where your services will primarily be provided.

You can also look this up on the Open Web website; <http://gisgate.co.clark.nv.us/openweb/> then click on search, then go to the address tab, type in your address and click on the property for property information. The Property Information box will include the Jurisdiction (for the next question).

11. Is your project new to your organization?

Indicate if your project is new, an expansion to existing services, or a continuation of services provided by your agency. This question is not asking if this project is a renewal or non-renewal of OAG funds.

12. New Project Justification.

If project is new to your agency justify why it was created. Identify how your project will help fill any gaps in services. Explain if any analysis was conducted to validate the need to create your project. If project is not new, type in N/A.

13. Project accomplishment history.

Describe your project accomplishments over the last 3 years. Use specific and measureable indicators. Be descriptive of the services and outcomes/accomplishments.

You may break out the numbers in annual increments or on a more frequent level. Be sure to specify the time period. For example:

In 2013, 100 babies were provided with 100 blankets (1 blanket per baby)

In 2012, 80 babies were provided with 80 blankets

In 2011, 75 babies were provided with 75 blankets.

If project is new, type N/A.

14. Financial Sustainability.

Describe your plan for financial sustainability and ongoing program support. Explain how your agency plans to seek and establish funding sources other than Outside Agency Funding in the long-term.

A financial plan for ongoing program support will need to identify funding sources your agency *anticipates* receiving funding from, as well as those your agency *will attempt* to receive funding assistance from. A financial plan for ongoing support will reflect projected income sources for the next three to five years, identifying sources (e.g., “participant fees”, “fundraising dinner”, “Christmas Appeals”, “Artwork Sales”, “Thrift Store”, “Sponsorships”, etc.).

Note, the budget section of the online application will also ask for funding/revenue sources for one year, 2018-2019.

15. County Funding History.

Has this *project* been awarded County funds within the past three years? Please indicate yes or no. (Note: Newly funded agencies will need to submit a 3-year funding history in the documents section). If your agency has received funding in the last three years but not the specific project please indicate in the next question, #16.

16. Funding History Detail.

Detail the amount and specify the County source for each of the past three years for which your project has received Clark County administered funding. If other projects within your agency received County funding, please specify. If no projects within your agency were OAG funded within the past 3 years type N/A.

17. Project Similarities.

Identify other agencies that provide similar services to your proposed project. Explain how your project's services differ from and overlaps with those providers.

18. Provider Collaboration.

Explain any efforts your agency has made to coordinate and collaborate with other agencies or service providers that provide similar services to similar populations. How has your agency avoided the duplication of services? Please, specific and list if you have any Memorandum of Understandings in place with any of these providers.

19. Reminder of General Requirements.

This question serves as a general reminder of the requirements. Note that this does not include all the requirements. Applicants must provide documentation of nonprofit status, a Certificate of Good Standing from the Nevada Secretary of State, and a Clark County Charitable Organization Registration Certificate. If you are recommended for funding the Outside Agency Grant resolution (the assistance agreement) will list major restrictions and requirements.

20. Reminders on Fiscal Management and Accountability: County grants are disbursed as reimbursement only.

Grant funds are paid to grant recipients based on actual expenditures. The agency must first expend its own funds on the “activities” approved in the Resolution to Grant funds, and then submit appropriate documentation as a Request for Reimbursement.

a) Appropriate documentation includes a front and back copy of the canceled check, a copy of the receipt or invoice detailing what was purchased or paid for, and limited information on client beneficiary (if expenditure was on behalf of client), and time sheets signed by supervisor/employee or board member/director for staff showing hours devoted to the OAG specific project.

b) It is advisable that agencies have three months of operating reserves, as reimbursement of funds can take 30 days after receipt of appropriate documentation.

Recipient agencies must have:

a) Adequate accounting records that provide reliable, complete and up-to-date information about sources and uses of funds, including retention of “source documentation” (receipts, invoices, canceled checks, vouchers, etc.) for all financial transactions

b) Adequate internal controls that warrant against misuse of funds or unallowable expenditures;

c) Bank account in the name of the agency; and

d) All checks made payable to any Board Member or the Executive Director (reimbursements, mileage, payroll, etc.) must be signed by two authorized persons.

While County funds may be used to support year-end recognition events for volunteers and/or clients, **County funds will not reimburse expenses related to fundraising activities, meals provided to staff, nor any alcoholic beverages.**

Once again, this is a summary and is not all inclusive. If you are recommended for funding the Outside Agency Grant resolution (the assistance agreement) will list major restrictions and requirements in more

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detail. Program requirements must adhere to 2 CFR Part 200: Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. https://www.ecfr.gov/cgi-bin/text-idx?SID=d78a2fc693b74674080479f4f792c4ba&mc=true&tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl

21. Program Activities.

How soon after notice of fund award and execution of grant agreement will you be ready to implement program activities?

22. Responsible Project Personnel.

Describe the primary personnel responsible for carrying out program activities by position/title and relevant experience. Indicate if position is paid staff or contracted.

DOCUMENTS

ALL APPLICANTS must complete and attach all required documents listed below (1-11).

***Exception:** Government agencies/divisions do not need to provide the Disclosure of Ownership, Compensation Disclosure, Non-Profit Determination Letter, most recent IRS Form 990, Financial Accountability Documents, or Charitable Organization Registration with Clark County (4-10). Instead, in document upload section for each of those requirements you will need to upload a memo stating that you are a governmental agency.

Note on Financial Accountability document (Attachment 8):

Audits must be submitted by agencies in accordance with Federal and County policies. Audits may not be older than FY2015. Applicants must submit one of the following with their application:

1. For agencies that expended \$750,000 or more in Federal or County funds during the agency's most recently completed fiscal year submit:
 - a. The most current single audit in compliance with 2 CFR Part 200, Subpart F, Audit Requirements (formerly OMB Circular A-133).
2. For agencies that expended between \$100,000 and \$749,999 in Federal or County funds during the agency's most recently completed fiscal year submit:
 - a. A copy of your organizations most recent audited financial statements.
3. For agencies that expended less than \$100,000 of Federal or County funds during that reporting period submit:
 - a. A letter stating that your agency expended less than \$100,000 in Federal or County funds during the latest reporting period (specify reporting period); AND

- b. Provide a copy of your unaudited financial statements and/or Profit & Loss statement sheet.

All nonprofit organizations please upload your State of Nevada Certificate of Good Standing <http://nvsos.gov/sos/businesses> and a Clark County Charitable Organization Registration Certificate from the Clark County Department of Business License. <http://www.clarkcountynv.gov/business-license/Pages/default.aspx>

There are instructions within the online application and in some cases instructions are also included in the attached documents. Please refer to those instructions. These notes solely supplement those instructions.

The first eleven listed documents are required from ALL applicants in PDF ONLY. They must be uploaded into ZoomGrants and submitted with your application. DO NOT UPLOAD DROPBOX OR JPEG documents.

- 1) Project Outcomes and Performance Measurements (*download this document*)
- 2) Proposed Budget & Budget Justification (*download this document*)
- 3) Leveraged Resources (*download this document*)
- 4) Disclosure of Ownership Form (*download this document*)
- 5) Agency Compensation Disclosure Form (*download this document*)
- 6) Non- Profit Determination Letter from IRS listing Tax Identification Number
- 7) IRS 990 (no older than 2016)
- 8) Audit or Financial Accountability Documents (no older than 2016)
- 9) Clark County Charitable Organization Registration Certificate (*download instructions*)
- 10) State of Nevada Certificate of Good Standing
- 11) Certification of Application (*download this document*)

Applicants who did not receive funding within the last 3 years will also need to upload all of the listed documents below (items 12-14).

- 12) Articles of Incorporation
- 13) Organization's By-Laws
- 14) Spreadsheet of Three Year Funding History

PROJECT PERFORMANCE OUTCOME MEASURES (Attachment 1)

Complete and describe the most significant outcome(s) the project is expected to accomplish in Fiscal Year 2018/2019. Describe the specific benefits or improvements experienced by your project/program beneficiaries. When completed upload to your application. Please report the unduplicated number of individuals served over the year. (See instructions in attachment)

PROPOSED BUDGET & BUDGET JUSTIFICATION (Attachment 2)

Please indicate the entire cost of the project as well as those portions where these funds will be used to pay specific costs. Please round to the nearest dollar and do not include cents. By disclosing the full project cost, you are: (1) demonstrating knowledge of the project and services being provided; (2) indicating the amount of funds leveraged by your County request; and, (3) assisting the County Commissioners in determining allocation amounts. Failure to provide both the full cost of the project and the requested funds amount may result in your application being removed from consideration. Please indicate the percent of the total PROJECT and AGENCY budget of the OAG request.

Budget Notes

- *Fundraising activities* may not be charged against these County funds, nor shall any voting member of the Board of Directors be paid as staff.
- Reimbursement for meals or food provided at meetings may be considered, but under no circumstances shall the costs for alcoholic beverages be reimbursed.
- Staff salaries being charged against County funds must have all proper taxes and deductions subtracted from their checks and appropriately paid to state and federal agencies:

Per IRS rules and regulations, staff must have all proper taxes and deductions subtracted from their checks; agency staff is not considered as consultants or independent contractors.

- *Staff salaries* are to be broken into two categories:
 - (1) Administrative/Operation salaries, and
 - (2) Salaries directly related to client services.
- Time sheets denoting amount of time spent on a project and indicating to which grant source(s) these costs are to be charged are required before the approval of the reimbursement of staff salaries. Two actual signatures (not typed) along with the date are required for payroll reimbursements; supervisor/employee or Board member/director.
- Office supplies should not exceed \$450 per FTE (full time employee).
- All projects receiving funding support from these County funds must obtain comprehensive fire and hazard insurance to cover the replacement cost of the project, comprehensive liability insurance and where appropriate, professional malpractice insurance, and fidelity bond on all senior staff. Comprehensive automobile liability insurance in the amount of \$1,000,000 per incidence is also required if an automobile is used in performance of the project. Costs for these expenditures are eligible for reimbursement from the OAG grant.

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- Note: if the amount indicated in “Total Project Cost Requested Portion Only” differs from the “Amount Requested,” the lesser of the two figures will be submitted for funding consideration.

For each item where a portion of the cost will be paid for with these funds, indicate the method used to determine the funding request, identifying budget line item, what unit of measurement is used, cost per unit, number of units and total costs to be charged to this budget. List the title and percent of salary for any staff that will be supported with County funds.

LEVERAGED RESOURCES (Attachment 3)

Leveraged resources consist of firm commitments of funds or goods and services from another source that will be expended if the project takes place because it receives gap funding from this local government process. Leveraged resources also include other resources – financial and in-kind – that will be available to support the project’s goals once implemented. This may include free office space, donated IT support, donations of goods and services for clients that your agency or the client would otherwise have to pay, or volunteer hours dedicated.

DISCLOSURE OF OWNERSHIP (Attachment 4)

The purpose of the Disclosure of Ownership/Principals Form is to gather ownership information pertaining to the business entity for use by the Board of County Commissioners (“BCC”).

Also upload a Board of Directors, Board committees, and Advisory Board list (only voting members are needed) with addresses. Include Board member resume/qualifications.

Completion and submission of this Form is a condition of approval or renewal of a contract or lease and/or release of monetary funding between the disclosing entity and the appropriate Clark County government entity. Failure to submit the requested information may result in a refusal by the BCC to enter into an agreement/contract and/or release monetary funding to such disclosing entity.

AGENCY COMPENSATION DISCLOSURE (Attachment 5)

Complete and list your organization's **top five salaried positions** and job titles for the last three years (2015, 2016, and 2017). Total Annual Compensation includes salaries and fringe benefits such as health insurance, car allowance, retirement funds, etc. For agencies that do not compensate its workers (a 100% volunteer workforce) indicate \$0 compensation and no paid positions. When completed upload to your application.

CHARITABLE ORGANIZATION REGISTRATION CERTIFICATE (Attachment 9)

The Charitable Organization Registration Certificate must be obtained through the Clark County Department of Business License. This certificate is free of charge and can be obtained by email. See instructions below. We will not accept a Nevada Business License or any other document in this field. If your organization is in need of a Clark County Charitable Organization Registration Certificate:

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- a) Download the Clark County Charitable Organization Registration Request Form.
- b) Complete the form and email Attachment 9 to either Allison Gigante AllisonG@ClarkCountyNV.gov or Karyn Keehr at karynk@ClarkCountyNV.gov.
- c) Within a matter of days the certificate will be emailed to you as an attachment, upload the certificate in ZoomGrants to complete the OAG application.
- d) For more information please call the Clark County Department of Business License at (702) 455-4252 or (702) 455-3584. Or click <http://www.clarkcountynv.gov/business-license/Pages/default.aspx>

STATE OF NEVADA CERTIFICATE OF GOOD STANDING (Attachment 10)

The State of Nevada Certificate of Good Standing can be obtained by visiting <http://nvsos.gov/sos/businesses> and then click on Certificate of Good Standing.

APPLICANT CERTIFICATION (Attachment 11)

Please have the authorized representative of your Board of Directors sign and date the Certification of Application.

By signing the Certification of Application, you are certifying that the governing body of your organization has duly authorized the application for these funds.

Your organization should be able to comply with the following if funded:

- a) Organization has the institutional, managerial, and financial capacity (including cash reserves to cover up to three (3) months of program operations) to plan, manage and complete the program as described in this application, and
- b) Will administer the grant in compliance with Nonprofit Organizations (formerly OMB Circular A-110), and 2 CFR 230 – Cost Principles for Nonprofit Organizations (formerly OMB Circular A-122).
- c) 2 CFR Part 200: Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

After all required sections of the online application have been completed and all required documents have also been uploaded; your application should be ready for on-line submittal.

ONLINE APPLICATIONS ARE DUE BY
FRIDAY, NOVEMBER 3, 2017 AT 5:00 PM
NO EXTENSIONS WILL BE GRANTED